Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

10612904

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN	
TOTAL CLAIMS			20					RATE	FEE		RATE	FEE .
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			<i>QO</i> minus 20= * ∠		* 6	27		X\$ 9=		OR	X\$18=	
INDÉPENDENT CLAIMS			2 minus 3 = * 2					X42=		OR	X84=	×6
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=	
* If	the difference	in column i is	less than zero, enter "0" in column 2			L	TOTAL	375		TOTAL		
	C	(Column 1)	MENDED - PART II (Column: 2) (Column 3			(Column 3)		SMALL I		OR	OTHER SMALL	7.5 TO 10 TO
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total		Minus	**		a		X\$ 9=		OR	X\$18=	
AME	Independent	X	Minus	***	<i>.</i>	-		X42≐		OR	X84=	
E Hai	FIRST PRESE	NTATION OF M	OLINERE DEI	ZENDEN	CLAIM		J	+140=		OR	+280=	
				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			L	TOTAL ODIT. FEE		ОΒ	TOTAL ADDIT: FEE	
		(Column 1)		(Colur		(Column 3)	_ Al	יווטע, רבב ן	,		AUDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	The second secon	RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus .	***	CL AINA]=		X42=		OR	X84=	
	irinoj irincoc	INTATION OF JUI	JUITE DE	-EINDEIN I	CLAIIVI		J -	+140=		OR	+280=	
							L	TOTAL DDIT. FEE		OD.	TOTAL ADDIT FEE	
		(Column 1)		(Colur		(Column 3)					ADDITITUE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total		Minus	**				X\$/9=		OR	X\$18=	
AME	Independent	***************************************	Minus	***				X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=	- 1		+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							L	TOTAL		OR	TOTAL	
***	lf the "Highest Nu	mber Previously P imber Previously P nber Previously Pa	aid For" IN TH	IS SPACE	is less tha	n 3, enter "3."	, AE	DIT. FEE	ropriate box	1.75	ADDIT FEE	